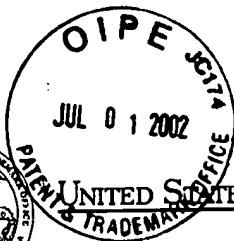


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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/996,953	11/30/2001	Marion J. Bussemakers	1619.0100000

CONFIRMATION NO. 2414

26111
STERNE, KESSLER, GOLDSTEIN & FOX PLLC
1100 NEW YORK AVENUE, N.W., SUITE 600
WASHINGTON, DC 20005-3934

FORMALITIES LETTER



OC000000007396404

Date Mailed: 01/31/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 65.

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

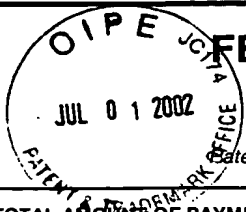
PART 2 - COPY TO BE RETURNED WITH RESPONSE

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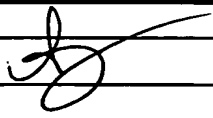
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 <h2 style="margin: 0;">FEE TRANSMITTAL for FY 2002</h2> <p style="margin: 0;">Patent fees are subject to annual revision.</p>		Complete if Known	
		Application Number	09/996,953
		Filing Date	November 30, 2001
		First Named Inventor	Marton J. BUSSEMAKERS
		Examiner Name	To be assigned
		Group Art Unit	1645
Attorney Docket No.		1619.0100000/SRL/AGU	
TOTAL AMOUNT OF PAYMENT		(\$525.00)	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																	
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Deposit Account Number</td> <td>19-0036</td> </tr> <tr> <td>Deposit Account Name</td> <td>Sterne, Kessler, Goldstein & Fox P.L.L.C.</td> </tr> </table> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other*</p> <p><small>*Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 19-0036.</small></p>	Deposit Account Number	19-0036	Deposit Account Name	Sterne, Kessler, Goldstein & Fox P.L.L.C.	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Angelique G. Uy	Registration No. (Attorney/Agent)	48,832
Signature		Telephone	202-371-2600
		Date	7/1/2002

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